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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. ENFORS 3.0-001 Att rney D cket Number DECLARATION FOR UTILITY OR DESIGN Hartej P. Singh First Named Inv nt r PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) 10/080,761 Application Number x Declaration February 22, 2002 Declaration Filing Date Submitted after Initial Submitted OR 2171 with Initial Filing (surcharge **Group Art Unit** Filing (37 CFR 1.16 (e)) Examiner Name Not Yet Assigned required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: PROACTIVE EMERGENCY RESPONSE SYSTEM (Title of the Invention) the specification of which is attached hereto 02/22/2002 as United States Application Number or PCT International was filed on (MM/DD/YYYY) 10/080,761 and was amended on (MM/DD/YYYY) Application No. (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed. rior Foreign Certified Copy Attached? Foreign Filing Date **Priority** Application (MM/DD/YYYY) **Not Claimed** Country Number(s)

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Pat nt Application									
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530									
Direct all correspondence to: X Customer Number or Bar Code Label O00530 OR Correspondence address below									
Name									
Address									
City			Stat	State ZIP					
					F				
Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:				A petition has been filed for this unsigned inventor					
Given Name Hartej P.					amily Name Singh r Surname				
Inventor's						Date 09/27/02-			
Livingston Residence: City	NJ State	U.S.A.			India Citizenship				
Mailing Address: 616 Turlington Ct.									
Livingston	NJ State	ZIP	07	039		U.S.A.			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						nas been filed for this unsigned inventor			
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Inventor's Signature				Date 09/27/2002					
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Malling 19 Amelia Street									
North Caldwell	NJ State	ZIP	07	006		U.S.A.			
X Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									

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AD					SUPPLIED SUP			
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Inventor's Signature				Date				
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City	State	ZIP			Country			
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Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature	Inventor's			Date				
Residence: City	y State Country			Citizenship				
Mailing Address:								
City	State	ZIP			Country			
Name of Additional Joint Invento	r, if any:			A petition I	has been filed for this unsigned inventor			
Given Name Family (first and middle [if any]) or Surn			mily Name Surname					
Inventor's Signature					Date			
Residence: City State Country		Country			Citizenship			
Malling Address:								
City	State	ZIP			Country			